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TRANSMITTAL FORM

(to be used for correspondence after initial filing)

Total Number of Pages in this Submission

16

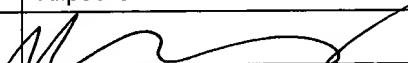
Attorney Docket Number M8540/248465

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip PTO/SB/69 and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (Please identify below)
<div style="border: 1px solid black; padding: 2px; text-align: center;">Remarks</div>		

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AUG 13 2001
TC 1706

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Bruce D. Gray, Reg. No. 35,799 Kilpatrick Stockton LLP	Customer Number 23370
Signature		
Date	August 6, 2001	

Certificate of Mailing

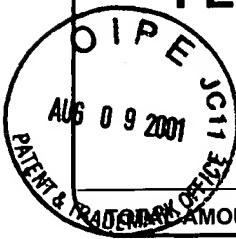
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Typed or printed name

Rebecca Smith

Signature		Date	August 6, 2001
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FEE TRANSMITTAL for FY 2001



Patent fees are subject to annual revision.

AMOUNT OF PAYMENT (\$ 1000)

Complete If Known	
Application Number	09/695,194
Filing Date	October 24, 2000
First Named Inventor	Jubb
Examiner Name	K. Group
Group / Art Unit	1755
Attorney Docket No.	M8540/248465

METHOD OF PAYMENT (check one)	
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	
Deposit Account Number	11-0855
Deposit Account Name	KILPATRICK STOCKTON LLP
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	
<input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	

FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
101	710	201	355	Utility filing fee
106	320	206	160	Design filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional filing fee
SUBTOTAL (1)				(\$ 0)
2. EXTRA CLAIM FEES				
Total Claims	Extra Claims	Fee from below	Fee Paid	
	= 0	X 18	= 0	
Independent Claims	= 0	X 80	= 0	
Multiple Dependent		X	= 0	
Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)				
3. ADDITIONAL FEES				
Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
105	130	205	65	Surcharge - late filing fee or oath
127	50	227	25	Surcharge - late provisional filing fee or cover sheet
139	130	139	130	Non-English specification
147	2,520	147	2,520	For filing a request for reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	390	216	195	Extension for reply within second month
117	890	217	445	Extension for reply within third month
118	1,390	218	695	Extension for reply within fourth month
128	1,890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,240	241	620	Petition to revive - unintentional
142	1,240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	130	123	130	Petitions related to provisional applications
126	180	126	180	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application
Other fee (specify) Terminal Disclaimer				110
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 1000)

SUBMITTED BY					
Name (Print/Type)		Registration No. Attorney/Agent)		Telephone	Complete (if applicable)
Bruce D. Gray		35,799		404.815.6218	
Signature				Date	August 6, 2001

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.